Fill in this information to identify your case:		
United States Bankruptcy Court for the:	***]
EASTERN DISTRICT OF WASHINGTON, YAKIMA DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing
		1

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and In joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself						
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
Your full name	and the second of the second o	And the second s				
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Maria First name E. Middle name	First name				
Bring your picture identification to your meeting with the trustee.	Torres Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)				
All other names you have used in the last 8 years	· ·					
Include your married or maiden names.						
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4106					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years include your married or maiden names. Only the last 4 digits of your Social Security number or federal individual Taxpayer identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number Maria First name First name First name All other name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names.				

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De	btor 1 Torres, Maria E.		Case number (# known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		607 S Toppenish Ave Toppenish, WA 98948-1720 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Yakima	: 		
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	-				

De	btor 1 Torres, Maria E.		.,			Case numb	PET (If known)	
Pa	rt 2: Tell the Court About	Your Ba	nkruptcy C	ase				
7.	The chapter of the Bankruptcy Code you are	Check 2010),	one. (For a	brief description the top of page 1	of each, see <i>Notice Req</i> eand check the appropria	uired by 11 U.S.C. § 34 ate box.	12(b) for Individuals Filing for Banki	ruptcy (Form
	choosing to file under	_	napter 7					
		□ cł	☐ Chapter 11					
		☐ Cŧ	napter 12					
		☐ Ch	apter 13					
8.	How you will pay the fee		about now ye If your attorn	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details yout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a e-printed address.				
			need to pa	y the fee in inst	allments. If you choose	this option, sign and att	tach the Application for Individuals	to Pay The
			I request the	at my fee be wai to, waive your fee	e, and may do so only if w	Our income is less than	e filing for Chapter 7. By law, a judç 150% of the official poverty line th	ot applian to
			to Have the	ze and you are u Chapter 7 Filing F	nable to pay the fee in in: Fee Waived (Official Fori	stallments). If you choo n 103B) and file it with	se this option, you must fill out the your petition.	Application
9.	Have you filed for bankruptcy within the last	■ No.	**************************************			**************************************		***************************************
	8 years?	☐ Yes						
			District		When		Case number	
			District		When			
			District		When		Cooperation	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	- 110		W-2				
			Debtor				Relationship to you	
			District		When		Case number, if known	
			Debtor				Relationship to you	
			District		When	•	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to I	ne 12.				
		☐ Yes.	Has yo	ur landlord obtai	ned an eviction judgmer	it against you?		
				No. Go to line 1	2.			
				Yes. Fill out <i>Initia</i> bankruptcy petiti	al Statement About an E ion.	viction Judgment Agair	nst You (Form 101A) and file it as p	part of this
			·····					

Deh	otor 1 Torres, Maria E.		ê		Case number <i>(if known)</i>		
DGL	Torres, Maria E.				Case Humbel (# known)		
Par	t 3: Report About Any Bu	sinesses '	You Own	as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.				
		☐ Yes.	☐ Yes. Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numl	oer, Street, City, Sta	te & ZIP Code		
	to this petition.		Chec	k the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 1 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am i	not filing under Cha _l	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	í am í	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Pari	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		What is	the hazard?			
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
					Number, Street, City, State & Zip Code		

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Debtor 1	Torres.	Mar

S, Maria E. Case number (# known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary walver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 16.			orting Purposes				
16.		100					
		16a. <i>i</i>	Are your debts primarily condividual primarily for a perso	onsumer debts? Consumer debts are defin onal, family, or household purpose."	ned in 11 U.S.C.§ 101(8) as "incurred by an		
		I	☐ No. Go to line 16b.				
		l	Yes. Go to line 17.				
		16b. <i>f</i>	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
		ſ	☐ No. Go to line 16c.				
		[☐ Yes. Go to line 17,				
		16c. \$	State the type of debts you ow	ve that are not consumer debts or business	debts		
	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	Yes. I	I am filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will be	I	No				
	available for distribution to unsecured creditors?	[] Yes				
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	□ 50,001-100,000		
		□ 100-199 □ 200-999		☐ 10,001-25,000	☐ More than100,000		
19.	How much do you	\$ \$0 - \$50	,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
ĺ	estimate your assets to be worth?	\$50,001		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion		
		Ф300,00	ı - \$7 million		☐ More than \$50 billion		
	How much do you	\$0 - \$50 ,	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	\$50,001		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion		
		\$100,00° \$500,00°		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$10,000,000,001 - \$50 billion		
		L \$500,00	ı - ֆ і Мішол		☐ More than \$50 billion		
Part 7	7: Sign Below						
or y	ou	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		l understand case can res /s/ Maria E	cuit in fines up to \$250,000, o	oncealing property, or obtaining money or pr r imprisonment for up to 20 years, or both. 1	operty by fraud in connection with a bankruptcy is U.S.C. §§ 152, 1341, 1519, and 3571.		
	-	Maria E. T Signature of	orres	Signature of Debtor	2		
		Executed on	October 31, 2019 MM / DD / YYYY	Executed on MM	/DD/YYYY		

Debtor 1 Torres, Maria E.		Cas	se number(if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition,	declare that I have inf	ormed the debtor(s) about eligibility to proceed under
If you are not represented by an attorney, you do not need to file this page.	Chapter 7, 11, 12, or 13 of title 11, United States Code person is eligible. I also certify that I have delivered to which § 707(b)(4)(D) applies, certify that I have no knopetition is incorrect.	the debtor(s) the noti	ce required by 11 U.S.C. § 342(b) and, in a case in
	/s/ Patrick A. True Signature of Attorney for Debtor	Date	October 31, 2019 MM / DD / YYYY
	Patrick A. True True Law Group		
	303 E. "D" Street, Ste 2 Yakima, WA 98901		
	Number, Street, City, State & ZIP Code		
	Contact phone 26079 Bar number & State	Email address	ptcmecf@gmail.com

Fill in th	nis information to identify y	your case and this filing:		
Debtor 1	Maria E, Torres			
	First Name	Middle Name Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Lest Name		
			j	
United States Ba	ankruptcy Court for the: _E/	ASTERN DISTRICT OF WASHINGTON, YAKIMA DIVIS	ION	
Case number				☐ Check if this is a
				amended filing
<u>Official Fo</u>	rm 106A/B			
Schedul	e A/B: Prope	rtv		40/48
In each category, s	eparately list and describe ite	ms. List an asset only once. If an asset fits in more than on	o catagon, list the speet	12/15
umuk u ma bast. Di	e as complete and accurate as e space is needed, attach a se	s possible. If two married people are filling together, both are parate sheet to this form. On the top of any additional page.	a agustiu ragaagatikia faa.	market in the later of the control of
Part 1: Describe	Each Residence, Building, La	nd, or Other Real Estate You Own or Have an Interest In		
1. Do you own or h	nave any legal or equitable inte	erest in any residence, building, land, or similar property?		
■ No. Go to Part				
Yes. Where is				
	o the property			
Part 2: Describe	Your Vehicles		<u> </u>	
□ No ■ Yes				
3.1 Make:		Who has an interest in the property? Check one	Do not deduct secured	claims or exemptions. Put
Model:		Debtor 1 only	the amount of any seco	ured claims on Schedule D
Year:		Debtor 1 only Debtor 2 only		laims Secured by Property.
Approximate	mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other Inform		☐ At least one of the debtors and another	. , ,	perment you only.
2008 CHe	vy Malibu		#0.000.00	
		Check if this is community property (see instructions)	\$2,000.00	\$2,000.00
Watercraft aire	iraft motor homes ATV-	and other recreational vehicles, other vehicles, and a		
Examples: Boats	s, trailers, motors, personal wa	atercraft, fishing vessels, snowmobiles, motorcycle acces	sories	
		·		
■ No				
☐ Yes				
5 Add the dollar	value of the portion you or	wn for all of your entries from Part 2, including any e	entries for names	
.you have attac	ched for Part 2. Write that n	umber here	=>	\$2,000.00
	_		L	
	our Personal and Household			
o you own or na	ive any legal of equitable il	nterest in any of the following items?		Current value of the portion you own?
				Do not deduct secured
				claims or exemptions.

Official Form 106A/B

Schedule A/B: Property

page 1

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	ebtor 1	Torres, Ma	ria E.	Case number	(if known)
6.	Househe Example □ No	old goods and es: Major applia	furnishings nces, furniture, linens, china, kitchenware		
	Yes.	Describe	Household goods; single mother	of teenager	\$2,000.00
7.	Electron Example	es: Televisions a	and radios; audio, video, stereo, and digital equ Il phones, cameras, media players, games	ipment; computers, printers, scanners; m	usic collections; electronic devices
	Yes.	Describe	Household electroncits		\$600.00
8.	Example No	oles of value es: Antiques and collections, i	figurines; paintings, prints, or other artwork; b петогаbilia, collectibles	ooks, pictures, or other art objects; stamp	o, coin, or baseball card collections; other
9.	Equipme Example	ent for sports a es: Sports, photo instruments	nd hobbies graphic, exercise, and other hobby equipment;	bicycles, pool tables, golf clubs, skis; ca	noes and kayaks; carpentry tools; musica
	■ Yes.	Describe	camping equipment and teenager'	s sports gear	\$350.00
	■ No □ Yes. Clothes Example □ No	les: Pistols, rifle	s, shotguns, ammunition, and related equipm		
	■ Yes. I	Describe	clothes		\$400.00
	⊔ No	es: Everyday jev	velry, costume jewelry, engagement rings, wed	ding rings, heirloom jewelry, watches, ger	
******	***************************************	······································	misc. jewelry		\$250.00
	Example ■ No	m animals es: Dogs, cats, l Describe	oirds, horses		
	■ No	er personal and Give specific info	d household items you did not already list,	including any health aids you did not	list
15	. Add the Part 3.	e dollar value o Write that num	of all of your entries from Part 3, including	any entries for pages you have attach	sed for \$3,600.00
Pai	rt.4: Desc	cribe Your Financ	cial Assets		

Official Form 106A/B

Schedule A/B: Property

page 2

Debtor 1 Torres, Ma	aria E.	Case number (if known)		
Do you own or have any	/ legal or equitable interest in an	y of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money you □ No	ı have in your wallet, in your home, i	in a safe deposit box, and on ha	and when you file your petition	
- 165			cash	\$100.00
17. Deposits of money Examples: Checking, institution: □ No ■ Yes	savings, or other financial accounts s. If you have multiple accounts wi	s; certificates of deposit; shares th the same institution, list eacl Institution name:	in credit unions, brokerage ho h.	uses, and other similar
— 165				
	17.1. Checking Accour	nt Heritage Bank		\$2,000.00
18. Bonds, mutual funds Examples: Bond funds ■ No	, or publicly traded stocks s, investment accounts with brokera	ige firms, money market accour	nts	
☐ Yes	Institution or issuer nar	me:		
19. Non-publicly traded s joint venture	stock and interests in incorporate	ed and unincorporated busin	esses, including an interest	in an LLC, partnership, and
■ No				
☐ Yes. Give specific in	nformation about them Name of entity:		% of ownership:	
Negotiable instruments Non-negotiable instrum	porate bonds and other negotiab is include personal checks, cashiers nents are those you cannot transfer	' checks, promissory notes, and	d money orders	
■ No □ Yes. Give specific inf	ormation about them Issuer name:			
21. Retirement or pension Examples: Interests in □ No	n accounts IRA, ERISA, Keogh, 401(k), 403(k	o), thrift savings accounts, or o	ther pension or profit-sharing	plans
Yes. List each accour	nt separately.			
	Type of account:	Institution name:		
***************************************	401(k) or Similar Plan	401k at School Distric	:t	unknown
22. Security deposits and Your share of all unuse Examples: Agreements No	prepayments of deposits you have made so that y s with landlords, prepaid rent, public	rou may continue service or use a utilitles (electric, gas, water), to	e from a company elecommunications companies	, or others
☐ Yes		Institution name or individu	al:	
23. Annuities (A contract fo	or a periodic payment of money to y	ou, either for life or for a numbe	er of years)	
	ssuer name and description.			
4. Interests in an education 26 U.S.C. §§ 530(b)(1),	on IRA, in an account in a qualific 529A(b), and 529(b)(1).	ed ABLE program, or under a	a qualified state tuition prog	ram.
• • •	nstitution name and description. Sep	parately file the records of any in	nterests.11 U.S.C. § 521(c):	
25. Trusts, equitable or fu	ture interests in property (other	than anything listed in line 1), and rights or powers exer	cisable for your benefit
☐ Yes. Give specific int	formation about them			
Official Form 106A/B		chedule A/B: Property		nega 3

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De	ebtor 1	Torres, Maria E.		Case number (if known)	
26.	Patents Examp	, copyrights, trademarks, trade	secrets, and other intellectual property es, proceeds from royalties and licensing	/ agreements	
	■ No	Give specific information about th		·	
27.	License	s, franchises, and other general		nuor licenses professional licenses	
	■ No	Give specific information about th	·	quoi ilicenses, professional licenses	
		•	o n		
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu □ No	ınds owed to you			
	Yes. C	Give specific information about ther	n, including whether you already filed the	returns and the tax years	
			2018 refund	Federal	\$4,000.00

29.	■ No		v, spousal support, child support, mainter	nance, divorce settlement, property	settlement
	Exampl	mounts someone owes you es: Unpaid wages, disability insura unpaid loans you made to sor Give specific information	nce payments, disability benefits, sick pay neone else	y, vacation pay, workers' compensa	tion, Social Security benefits;
		s in insurance policies			
	Exampl ■ No	es: Health, disability, or life insuran	ce; health savings account (HSA); credit,	homeowner's, or renter's insurance	
	☐ Yes. N	lame the insurance company of ea		Dan effeter e	O
		Company na	ame.	Beneficiary:	Surrender or refund value:
32.		erest in property that is due you e the beneficiary of a living trust, e	from someone who has died xpect proceeds from a life insurance polic	y, or are currently entitled to receive	property because someone has
		Give specific information			
			not you have filed a lawsuit or made a es, insurance claims, or rights to sue	a demand for payment	
		Describe each claim			
34.		ontingent and unliquidated clain	ns of every nature, including counterc	laims of the debtor and rights to	set off claims
	■ No □ Yes. I	Describe each claim			
35.	Any fina	ıncial assets you did not already	ı list		
	■ No □ Yes. <	Give specific information			
36			ies from Part 4, including any entries t		\$6,100.00

Official Form 106A/B

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Schedule A/B: Property

page 4

Del	btor 1	Torres, Maria E.		Case number (if known)	
Par	t 5: De	scribe Any Business-Related Property You Own or Have an Int	erest in. List any real est	ate in Part 1.	
	No. Go	own or have any legal or equitable interest in any business-rela to Part 6. So to line 38,	ated property?		
Par	t 6: De: If y	scribe Any Farm- and Commercial Fishing-Related Property Yo ou own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
46.	No.	own or have any legal or equitable interest in any farm- Go to Part 7. Go to line 47.	or commercial fishing	g-related property?	
Part	t 7 :	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
ı	<i>Examp</i> ■ No	have other property of any kind you did not already list les: Season tickets, country club membership Give specific information	?		
		ne dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8;	List the Totals of Each Part of this Form			
55. 56. 57. 58. 59. 60.	Part 2: Part 3: Part 4: Part 5: Part 6:	Total real estate, line 2	\$2,000.00 \$3,600.00 \$6,100.00 \$0.00 \$0.00 \$0.00		\$0.00
62.	Total	personal property. Add lines 56 through 61	<u>\$11,700.00</u>	Copy personal property total	\$11,700.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62	·		\$11,700.00

Official Form 106A/B

Schedule A/B: Property

page 5

Debtor 1	Maria E. Torres			
	First Name	Middle Name	Last Name	•
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	• }
Case number (if known)				☐ Check if this is ar
				amended filing

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming?	Check one only, even	if vou	r spouse is filing with you	
	☐ You are claiming state and federal nonbankr		-	· ·	
	You are claiming federal exemptions. 11 U.	S.C. § 522(b)(2)		- ',','	
2.	For any property you list on Schedule A/B t	hat you claim as exe	mpt, f	ill in the information below.	
	Brief description of the property and line on	Current value of the	Am	ount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B that lists this property	Copy the value from Schedule A/B	Che	nck only one box for each exemption,	
	2008 CHevy Malibu Line from Schedule A/B: 3.1	\$2,000.00		\$200.00	11 USC § 522(d)(2)
	Line from Scriedule A/B; 3. f			100% of fair market value, up to any applicable statutory limit	
	Household goods; single mother of	\$2,000.00		\$2,000.00	11 USC § 522(d)(3)
	teenager Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Household electroncits Line from Schedule A/B: 7.1	\$600.00		\$600.00	11 USC § 522(d)(3)
	Line IIOn Schedule Arb. 7.1			100% of fair market value, up to any applicable statutory limit	
	camping equipment and teenager's sports gear	\$350.00	=	\$350.00	11 USC § 522(d)(5)
	Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	
	clothes Line from Schedule A/B: 11.1	\$400.00	•	\$400.00	11 USC § 522(d)(3)
	Line nom <i>Schedule AVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Part 1: Identify the Property You Claim as Exempt

B	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	nck only one box for each exemption.	
	ilsc. jewelry ne from Schedule A/B: 12.1	\$250.00		\$250.00	11 USC § 522(d)(4)
				100% of fair market value, up to any applicable statutory limit	
	ash ne from <i>Schedule A/R</i> : 16.1	\$100.00		\$100.00	11 USC § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	eritage Bank ne from Schedule A/B: 17.1	\$2,000.00		\$2,000.00	11 USC § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	P1k at School District				11 USC § 522(d)(12)
L11	io iioiii ooricaale Alb 21.1			100% of fair market value, up to any applicable statutory limit	
	118 refund ne from Schedule A/B: 28.1	\$4,000.00		\$4,000.00	11 USC § 522(d)(5)
		-		100% of fair market value, up to any applicable statutory limit	
3. A r (Si	e you claiming a homestead exemption of ubject to adjustment on 4/01/22 and every 3 No	years after that for cases	s filed	,	
	Yes. Did you acquire the property covered No	by the exemption within	1,215	days before you filed this case?	
	☐ Yes				

Fill in this information to i	dentify your case.			
Debtor 1 Maria E. Tor				
First Name	res Middle Name Last Name		_	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name		. [
United States Bankruptcy Court for		AMINAA DINJICIONI		
Office States Bankruptcy Court for	LAGILITY BIOTHIOT OF WASHINGTON, 17	AKIMA DIVISION	-	
Case number(if known)				
				cif this is an ded filing
Official Form 106D				
Schedule D: Credito	rs Who Have Claims Secured	d by Propert	У	12/15
Be as complete and accurate as possilt needed, copy the Additional Page, fill it known).	ele. If two married people are filing together, both are equ out, number the entries, and attach it to this form. On th	ually responsible for su ne top of any additional	pplying correct informat pages, write your name	ion. If more space is and case number (II
Known). 1. Do any creditors have claims secure	d by your property?			
	it this form to the court with your other schedules. You	havo pothina olgo to ro	port on this form	
■ Yes. Fill in all of the information		nave nothing else to re	port on this form.	
Part 1: List All Secured Claims	in buon.			
	no more than any accuracy alsies that the security	Column A	Column B	Column C
for each claim. If more than one creditor	as more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Carmona Auto Sales	Describe the property that secures the claim:	\$1,800.00	\$2,000.00	\$0.00
Creditor's Name	2008 CHevy Malibu	·	,	
	As of the date you file, the claim is: Check all that			
	apply. □ Contingent			
Number, Street, City, State & Zip Code	_ ☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secu	ured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	r 🔲 Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (Including a right to offset)		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in if this is the last page of your form, add	Column A on this page. Write that number here:	\$1,800		
Write that number here:	Talle totale from un puges.	\$1,800.	.00	
Part 2: List Others to Be Notified	for a Debt That You Already Listed			
	be notified about your bankruptcy for a debt that you a	Iready listed in Part 1	or example, if a collecti	ion occupation

ose this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fi	II in this info	rmation to identify you	ır case:					
Debt	tor 1	Maria E. Torres						
		First Name	Middle I	Name	Last Name		 }	
Debt (Spour	or 2 se if, filing)	First Name	Middle I	Name	Last Name			
Unite	ed States Ban	kruptcy Court for the:	EASTERN	DISTRICT OF W	ASHINGTON, Y	AKIMA DIVISION	<u> </u>	
Case	e number							
(if kno								Check if this is an
					***************************************			amended filing
Offi	cial Form	106F/F						
		F: Creditors W	ho Have	Hnsacura	d Claime			12/15
						art 2 for craditors	with NONDRIORITY clair	ims. List the other party to
D: Cre the Co case n	editors Who Ha entinuation Pag number (if kno	ave Claims Secured by Pr ge to this page. If you hav	operty. If more ve no informati	e space is needed, ion to report in a F	copy the Part yo	u need, fill it out, n	umber the entries in th	that are listed in Schedule e boxes on the left. Attach s, write your name and
		s have priority unsecured						
	No. Go to Pa	nrt 2.						
	☐ Yes.							
100	0 12-4 411	- (V NONDBIODIT)		01-1				
Part		of Your NONPRIORITY	•					
_		s have nonpriority unsec	·	•				
L	I No. You have	e nothing to report in this pa	art. Submit this t	form to the court wi	th your other sche	dules.		
•	Yes.							
u	nsecured claim nan one creditor	nonpriority unsecured cfa , list the creditor separately r holds a particular claim, ils	for each claim.	For each claim list	ed, identify what t	pe of claim it is. Do	not list claims already in	
								Total claim
4.1		ollectors		Last 4 digits of a	ccount number			 \$700.00
	Nonpriority	Creditor's Name		When was the de	bt incurred?			
	PO Box	2365					·	_
		WA 98907-2365 eet City State Zip Code		A a a f 45 a d a ta	fila Alaa alabaa l	a. Obaali all that and	J	
		red the debt? Check one.		As of the date yo	u nie, the claim i	s: Check all that app	ыу	
	Debtor 1			☐ Contingent				
	Debtor 2	•		Unliquidated				
	_	and Debtor 2 only		☐ Disputed				
		one of the debtors and ano	ther	Type of NONPRI	ORITY unsecured	f claim:		
		f this claim is for a comm	nunity	☐ Student loans				
	debt	n subject to offset?				ration agreement or	divorce that you did not	
	No	i adaject to onset:		report as priority of Debts to pensi		g plans, and other si	milar debts	
	— No □ Yes			Other. Specify		a Louis, and 44141 at		
				— Outer opecity				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

Debto	1 Torres, Maria E.	Case number (if known)	
4.2	Allied Interstate	Last 4 digits of account number	\$150.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 361445		
	Columbus, OH 43236-1445	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
		Other. Specify collection	
4.3	Astria Sunnyside	Last 4 digits of account number	£4 500 00
	Nonpriority Creditor's Name	Last 4 digits of account number	\$1,500.00
		When was the debt incurred?	
	PO Box 719		
	Sunnyside, WA 98944-0719 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the tast you me, the statings offered and that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify medical	
4.4	Bonneville	Last 4 digits of account number	\$260.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	1186 E 4600 S Ste 100		
,	Ogden, UT 84403-4896	-	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify services rendered	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 11

Debt	Torres, Maria E.	Case number (f known)			
4.5	Cascade Natural Gas Nonpriority Creditor's Name	Last 4 digits of account number	\$310.00		
	PO Box 990065 Boise, ID 83799-0065	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify services rendered			
4.6	Century Link Nonpriority Creditor's Name	Last 4 digits of account number	\$310.00		
	Nonpriority Creditor's Name	When was the debt incurred?			
	PO Box 2961 Phoenix, AZ 85062-2961				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	☐ Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify services rendered			
4.7	Chapman Financial	Last 4 digits of account number	\$61.00		
	Nonpriority Creditor's Name	When was the debt incurred?			
	PO Box 7100 Coeur d Alene, ID 83816-1940	Which was the dept medified (
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify collection			

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Torres, Maria E.	Case number (f known)	
4.8	Convergent Outsourcing Nonpriority Creditor's Name	Last 4 digits of account number	\$877.00
	remprising creates a realise	When was the debt incurred?	
	10750 Hammerly Blvd Ste 200 Houston, TX 77043-2317		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify collection	
4.9	Credit Protection Association	Last 4 digits of account number	
	Nonpriority Creditor's Name	Last 4 digits of account number	\$111.00
		When was the debt incurred?	
	PO Box 9037		
	Addison, TX 75001-9037 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Maria .	
	_	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	LJ Yes	Other. Specify collection	
	First National Collection Bureau	Last 4 digits of account number	\$1,038.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	610 Waltham Way Sparks, NV 89434-6695		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	ls the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Collection	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 11

Debto	r 1 Torres, Maria E.	Case number (f known)			
4.11	First Premier Nonpriority Creditor's Name	Last 4 digits of account number	\$389.00		
	Nonpholity Creditor's Name	When was the debt incurred?			
	PO Box 5524				
	Sioux Falls, SD 57117-5524	-			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only				
	•	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community debt				
	is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify credit card	*		
4.12	Harvard Collection Serv.	Last 4 digits of account number	\$436.00		
	Nonpriority Creditor's Name		ψ-30.00		
	4839 N Elston Ave	When was the debt incurred?			
	Chicago, IL 60630-2534				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify collection			
4.13	LVNV Funding Nonpriority Creditor's Name	Last 4 digits of account number	\$982.00		
	Monthlone Creditor's Name	When was the debt incurred?			
	PO Box 10497				
	Greenville, SC 29603-0497	-			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	\square Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify collection			

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Torres, Maria E.	Case number (f known)	
4.14	Macy's Nonpriority Creditor's Name	Last 4 digits of account number	\$377.00
	Nonphonty Creditor's Name	When was the debt incurred?	
	PO Box 689195		
	Des Moines, IA 50368-9195 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dant is. Offect all that apply	
	■ Debtor 1 only	☐ Contingent	
	□ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	
4.15	MBA Law	Last 4 digits of account number	\$996.00
	Nonpriority Creditor's Name	When was the debt incurred?	*
	222 Texoma Pkwy Ste 160 Sherman, TX 75090	Which was the dept modified?	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	Other. Specify collection	
4.16	NCO Financial Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00
	Horipicity ordates s Name	When was the debt incurred?	
	PO Box 15630		
	Wilmington, DE 19850-5630 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you life, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify collection	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	r 1 Torres, Maria E.	Case number (if known)		
4.17	PAML Nonpriority Creditor's Name	Last 4 digits of account number	\$65.00	
	PO Box 2720	When was the debt incurred?		
	Spokane, WA 99220-4002			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify medcial		
4.18	Payne & Hickel	Last 4 digits of account number	4000.00	
	Nonpriority Creditor's Name		\$900.00	
		When was the debt incurred?		
	PO Box 582 Woodinville, WA 98072-0582	-		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	,,,,,,,, .		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	□ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Dobligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify collection NSB	•	
4.19	RJM Aquistions	Last 4 digits of account number	\$173.00	
	Nonpriority Creditor's Name	When was the debt incurred?		
	575 Underhill Blvd Ste 224 Syosset, NY 11791-3416			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify collection		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	Torres, Maria E.	Case number (f known)	
4.20	Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	\$250.00
	•	When was the debt incurred?	
	PO Box 965061		
	Orlando, FL 32896-5061 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	res of the date you me, the countries. One of all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify credit card	
4.21	Toppenish Community Hosp.	Last 4 digits of account number	\$150.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	502 W 4th Ave	When was die debt lifelitied t	
	Toppenish, WA 98948-1616		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check If this claim is for a community debt	☐ Student loans	
	ls the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify medical	
		Other: Specify Interior	
4.22	Unique Collections	Last 4 digits of account number	\$300.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	119 E Maple St	When was the dept incurred?	
	Jeffersonville, IN 47130-3439		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collection	

Schedule E/F: Creditors Who Have Unsecured Claims

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US Bank	Debtor	1 Torres, Maria E.	Case number (f known)			
PO Box 108 Saint Louis, MO 63166-0108 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only 1 Debtor 2 only Debtor 3 only 1 Debtor 4 only 2 Debtor 5 only 2 Debtor 5 only 2 Debtor 5 only 3 Debtor 6 only 3 Debtor 7 Debtor 6 only 3 Debtor 7 Debtor 6 Debtor 6 Debtor 6 only 3 Debtor 7 Debtor 8 Debtor 9 Deb	4.23		Last 4 digits of account number	\$50.00		
PO Box 108 Saint Louis, MO 63166-0108 Number Street City Stars 2ip Code Who Incurred the debt? Check one. Debtor 1 only Unitiquidated Debtor 2 only Unitiquidated Debtor 3 only Unitiquidated Debtor 3 only Unitiquidated Debtor 3 only Unitiquidated Debtor 4 only Unitiquidated Debtor 5 only Unitiquidated Debtor 5 only Unitiquidated Debtor 6 only Unitiquidated Debtor 8 only Unitiquidated Debtor 8 only Unitiquidated Debtor 8 only Unitiquidated Debtor 9 o		Nonpriority Creditor's Name	When was the debt incurred?			
Debtor 1 and Pebbor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Altest one of the debtore and another Check if this claim is for a community debt In No Debtor 3 and Debtor 3 only Noperority Creditor's Name PO Box 5227 Greenville, 17 x 75403-5227 Number 5 itsel club; state 2 pc Code Who incurred the debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only De		Saint Louis, MO 63166-0108 Number Street City State Zip Code				
Debtor 2 only		Debtor 1 only				
Debtor 1 and Debtor 2 only		Debtor 2 only				
A: least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is the claim subject to offset? Check one. Check if this claim is the claim subject to offset? Check one. Check if this claim is the claim subject to offset? Check one. Check if this claim is the claim subject to offset? Check one. Check if this claim is the claim subject to offset? Check one. Check one		<u> </u>	•			
debt is the claim subject to offset? Cother Specify Overdrafted account		•				
Subsection of State Claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts		☐ Check If this claim is for a community				
4.24 US Dept of Education Last 4 digits of account number \$6,500.00		Is the claim subject to offset?				
Last 4 digits of account number \$6,500.00		■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
Nonpriority Creditor's Name PO Box 5227 Greenville, TX 75403-5227 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 teleast one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Nonpriority Creditor's Name When was the debt incurred? Last 4 digits of account number When was the debt incurred? S500 Oakbrook Pkwy Ste 300 Norcross, GA 30093-2273 Number 5 sweet City Site Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Sident loans Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Sident loans Debtor 6 of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Debtor 6 only Debtor 9 only De		☐ Yes	■ Other. Specify overdrafted account			
When was the debt incurred? PO Box 5227 Greenville, TX 75403-5227 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 street debt is the claim soft of debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name West Asset Managment Nonpriority Creditor's Name When was the debt incurred? Last 4 digits of account number When was the debt incurred? Last 4 digits of account number When was the debt incurred? Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply West Asset Managment Nonpriority Creditor's Name When was the debt incurred? Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply West Asset Managment I contingent Unliquidated Debtor 1 only Debtor 1 only Debtor 2 only Unliquidated Debtor 2 only Unliquidated Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 5 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Expect of NoNPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Debtor 1 and Debtor 3 and another Check if this claim is for a community debt as person or profit-sharing plans, and other similar debts	4.24	US Dept of Education Nonpriority Creditor's Name	Last 4 digits of account number	\$6,500.00		
Account Table Ta			When was the debt incurred?			
Debtor 2 only		Greenville, TX 75403-5227 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Debtor 1 best to pension or profit-sharing plans, and other similar debts No Debtor Specify		Debtor 1 only	☐ Contingent			
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Other. S		☐ Debtor 2 only	☐ Unliquidated			
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No		Debtor 1 and Debtor 2 only	·			
debt sthe claim subject to offset? Check if this claim is for a community debt sthe claim subject to offset? Check if this claim is for a community debt Student loans Check if this claim is for a community debt Student loans Check if this claim subject to offset? Check on or profit-sharing plans, and other similar debts Check on position or profit-sharing plans, and other similar debts Check to pension or profit-sharing plans, and other similar debts Check to pension or profit-sharing plans, and other similar debts Check to pension or profit-sharing plans, and other similar debts Check to pension or profit-sharing plans, and other similar debts Check if this claim is for a community claims Check if this claim subject to offset? Check to pension or profit-sharing plans, and other similar debts Check if this claim is for a community claims Check if this claim subject to offset? Check if this claim subject to offset? Check if this plans, and other similar debts Check if this claim subject to offset? Check if this plans, and other similar debts Check if this claim subject to offset? Check if this plans, and other similar debts Check if this claim subject to offset? Check if this plans, and other similar debts Check if this claim subject to offset? Check if this plans, and other similar debts Check if this plans, and other simila		☐ At least one of the debtors and another	_			
No		debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Yes		_				
West Asset Managment Last 4 digits of account number \$500.00		• • •				
Nonpriority Creditor's Name ### When was the debt incurred? ### As of the date you file, the claim is: Check all that apply ### As of the date you file, the claim is: Check all that apply ### As of the date you file, the claim is: Check all that apply ### As of the date you file, the claim is: Check all that apply ### As of the date you file, the claim is: Check all that apply ### Contingent ### Unliquidated ### Debtor 1 and Debtor 2 only ### Disputed ### Type of NONPRIORITY unsecured claim: ### Check if this claim is for a community debt ### Is the claim subject to offset? ### Obligations arising out of a separation agreement or divorce that you did not report as priority claims ### Debts to pension or profit-sharing plans, and other similar debts		Li Yes	LJ Other. Specify			
S500 Oakbrook Pkwy Ste 300 Norcross, GA 30093-2273 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debti of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	4.25	West Asset Managment	Last 4 digits of account number	\$500.00		
Norcross, GA 30093-2273 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts		Troughouty ordator a reality	When was the debt incurred?			
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□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim is: Check all that apply			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 only	☐ Confingent			
□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 2 only				
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts		•				
debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims No		At least one of the debtors and another				
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts						
■ No □ Debts to pension or profit-sharing plans, and other similar debts						
		■ No	•			
		Yes	Other. Specify collection			

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	r 1 Torres, Maria E.	Case number (f known)	
4.26	Yakima Adjustment Service Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00
	PO Box 512 Yakima, WA 98907-0512 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not 	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify collection	
4.27	Yakima Memorial Hospital Nonpriority Creditor's Name 2811 Tieton Dr	Last 4 digits of account number When was the debt incurred?	\$150.00
	Yakima, WA 98902-3761 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not 	
	is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify medical	
4.28	Yakima Valley Farm Workers Nonpriority Creditor's Name PO Box 190	Last 4 digits of account number When was the debt incurred?	\$500.00
	Toppenish, WA 98948-0190 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	

Schedule E/F: Creditors Who Have Unsecured Claims

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YCCS	_		Last 4 digits of account number			\$
Nonprio	ority Cre	ditor's Name	When was the debt incurred?		-	
PO Box 9244 Yakima, WA 98909-024					,,,,	
		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Chec	k all that apply	
■ Deb	otor 1 on	ly	☐ Contingent			
☐ Deb	otor 2 oni	ly	Unliquidated			
□ Deb	otor 1 and	d Debtor 2 only	☐ Disputed			
☐ At le	east one	of the debtors and another	Type of NONPRIORITY unsecure	d claim;		
_		s claim is for a community	☐ Student loans			
debt		bject to offset?	☐ Obligations arising out of a separe of the Department of the De	aration aç	greement or divorce that you did not	
■ No			Debts to pension or profit-shari	ng plans,	and other similar debts	
□ Yes			Other. Specify collection			
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s page g to co ore that I for an Add ne amounsect	only if y ifect from the control of	ou have others to be notified ab myou for a debt you owe to son reditor for any of the debts that In Parts 1 or 2, do not fill out or nounts for Each Type of Unscertain types of unsecured claim im. Domestic support obligations Taxes and certain other debts: Claims for death or personal in Other. Add all other priority unse Total Priority. Add lines 6a through the second structure of the second structure. Student loans Obligations arising out of a second s	out your bankruptcy, for a debt that y neone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page. ecured Claim as. This information is for statistical r you owe the government jury while you were intoxicated cured claims. Write that amount here. agh 6d.	eporting 6a. 6b. 6c. 6d. 6e.	purposes only. 28 U.S.C. §159. Add the solutions of the collection	. Similarly, al persons t
s page g to co nore tha d for an Add	only if y ifect from the control of	ou have others to be notified ab myou for a debt you owe to son reditor for any of the debts that In Parts 1 or 2, do not fill out or nounts for Each Type of Unscertain types of unsecured claim im. Domestic support obligations Taxes and certain other debts of Claims for death or personal in Other. Add all other priority unse Total Priority. Add lines 6a through the company of	out your bankruptcy, for a debt that y neone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page. ecured Claim as. This information is for statistical r you owe the government jury while you were intoxicated cured claims. Write that amount here. agh 6d.	eporting 6a. 6b. 6c. 6d.	or 2, then list the collection agency here additors here. If you do not have additions purposes only. 28 U.S.C. §159. Add the Total Claim \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 Total Claim	. Similarly, i al persons t

Total Nonpriority. Add lines 6f through 6l.

	Fill√in th	is information to ide	ntify your ca	se:		
Deb	otor 1	Maria E. Torres	5		""	7
Doh	otor 2	First Name	Mide	dle N ame	Last Name	
	use if, filing)	First Name	Mide	dle Name	Last Name	
Unit	ed States Ba	inkruptcy Court for the	: EASTER	RN DISTRICT OF WA	SHINGTON, YAKIMA DIVISION	
Cas (if kn	e number _ own)					☐ Check if this is an amended filing
						anonded ming
Off	icial Fo	rm 106G				
			ry Cont	tracts and U	Inexpired Leases	12/15
Be a	s complete a mation. If me	and accurate as poss ore space is needed,	ible. If two m	arried people are fili ditional page, fill it o	ng together, both are equally respons ut, number the entries, and attach it to	sible for supplying correct
addi	uonai pages,	, write your name and	d case numbe	er (if known).		
		any executory contr		•		
	■ No. Check Yes. Fill in	K this box and file this f all of the information ?	orm with the c nelow even if t	court with your other so he contacts of leases :	chedules. You have nothing else to report are listed on Schedule A/B:Property(Off	t on this form.
						· ·
	example, rer unexpired lea	nt, vehicle lease, cell	phone), See	the instructions for this	contract or lease. Then state what ea s form in the instruction booklet for more	examples of executory contracts and
	Person or o	company with whom Name, Number, Street, C			State what the contract or lease	is for
2.1	Name					
	Name					
	Number	Street	······································			
	City		State	ZIP Code		
2.2	Name					
	T VAJITO					
	Number	Street	.			
	City		State	ZIP Code		
2.3	Name					
	Hame					
	Number	Street				
	City		State	ZIP Code		
2.4				<u> </u>		
	N am e					
	Number	Street				
			Cit	700		
2.5	City		State	ZIP Code		
	Name				····	
	Number	Street		****		

Official Form 106G

City

Schedule G: Executory Contracts and Unexpired Leases

ZIP Code

Page 1 of 1

State

F	ill in this information to ident	fy your case:			
Debtor 1	Maria E. Torres				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT	OF WASHINGTON, YAK	IMA DIVISION	
Case num	nber				
(if known)		, , ,			☐ Check if this is an
					amended filing
Officia	al Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
■ No		∕ou are filing a joint case, ∉	do not list either spouse as	a codebtor.	
☐ Ye:	S				
2. Wit Califo	h in the last 8 years, have you rnia, Idaho, Louisiana, Nevada,	lived in a community po New Mexico, Puerto Rice	roperty state or territory o, Texas, Washington, an	? (Community property states and Wisconsin.)	nd territories include Arizona,
_	. Go to line 3. s. Did your spouse, former spou	se, or legal equivalent live	with you at the time?		
line 2	again as a codebtor only if th , Schedule E/F (Official Form	at person is a guaranto:	r or cosigner. Make sure	your spouse is filing with you you have listed the creditor o e Schedule D, Schedule E/F, o	n Schedule D (Official Form
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to Check all schedules that ap	whom you owe the debt pply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	·
	Number Street City	State	ZIP Code	_	
3.2	· ***	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
	,	5.0.0	Zir Gode		

Fil	ll in this information to identify y	our case:					
Dε	ebtor 1 Maria E	. Torres					
	ebtor 2 couse, if filing)						
Un	nited States Bankruptcy Court fo	or the: EASTERN DISTRICT	FOF WASHINGTON, \	YAKIMA			
(If k	Official Form 106				income as	ed filing ent showing postpetitio of the following date:	n chapter 13
S	chedule I: Your I	ncome			MM / DD/	YYYY	12/15
sup spo atta	as complete and accurate as oplying correct Information. If buse. If you are separated and ach a separate sheet to this for the Describe Employment 1:	you are married and not filir your spouse is not filing wi rm. On the top of any addition	ig jointly, and your sp th you, do not include	oouse is livi: informatio	ng with you, inclu nabout your snot	de information about	your
1.	Fill in your employment information.		Debtor 1		Debtor	2 or non-filing spous)
	If you have more than one job attach a separate page with information about additional employers.	Employment status	■ Employed □ Not employed		□ Emp □ Not e	loyed employed	
	Include part-time, seasonal, o self-employed work.	Occupation Employer's name	Toppenish Scho	ool District			
	Occupation may include stud homemaker, if it applies.	ent or Employer's address					
		How long employed to	nere? 2 years				
Pa	rt 2: Give Details About	Monthly Income					
E sti unle	imate monthly income as of thess you are separated.	ne date you file this form. If y	ou have nothing to repo	rt for any line	, write \$0 in the sp	ace. Include your non-fi	ling spouse
f yo spac	ou or your non-filing spouse have ce, attach a separate sheet to thi	more than one employer, comb s form.	oine the information for	ail employers	for that person on	the lines below. If you	need more
					For Debtor 1	For Debtor 2 or non-filing spouse	
2.		salary, and commissions (be nly, calculate what the monthly t		2. \$	2,850.00	\$N/A	<u>\</u>
3.	Estimate and list monthly o	vertime pay.		3. +\$	0.00	+\$N/A	<u>.</u>
4.	Calculate gross Income. Ac	ld line 2 + line 3.		4. \$	2,850.00	\$ <u>N/A</u>	

Deb	tor 1	Torres, Maria E.		Case	number (if known)			
	Cor	oy line 4 here	4.	For \$	Debtor 1 2.850.00	For Debte	or 2 or spouse: N/A	
5.	List	all payroll deductions:		_				
0.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: workers comp/FMLA	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$ \$ \$ \$ \$ \$	284.00 140.00 0.00 0.00 170.00 0.00 0.00 19.00	\$ \$ \$ \$ \$ 4	N/A N/A N/A N/A N/A N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$-	613.00	* *	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	* — \$		\$	N/A	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	, . 8a.	°—	2,237.00	*	N/A N/A	
	8b.	Interest and dividends	8b.	\$-	0.00	\$	N/A	
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00	\$ \$ \$	N/A N/A N/A	
		Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	7	.237.00 + \$	N/A	\$ 2	237.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	- 11		,,207.00	19/5	`\	,237.00
11.	Inclu other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your definition or relatives. of include any amounts aiready included in lines 2-10 or amounts that are not available:	ependent	· · ·			. +\$	0.00
2.	Add Write	the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain	ult is the a Liabilities	combi and I	ned monthly inco Related <i>Data</i> , if it	me. applies 12.		237.00
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?				Combined monthly in	
		Yes. Explain:						
	_							

Fil	in this information to identify your case:					
Del	btor 1 Maria E. Torres			Check if	this is:	
] An	amended filing	
	btor 2 couse, if filing)					ng postpetition chapter 13
l (Sh	ouse, ii iiiiig <i>)</i>			exp	enses as of the fo	ollowing date:
Uni		RN DISTRICT OF WASHI DIVISION	NGTON,	MM	/DD/YYYY	
Cas	se number					
	known)					
0	fficial Form 106J		•			
S	chedule J: Your Expens	ses				12/1:
Be info (if I	as complete and accurate as possible. It ormation. If more space is needed, attacl known). Answer every question.	two married people are	filing together, both are eq rm. On the top of any addi	ually re tional p	sponsible for si ages, write you	upplying correct
Par 1.	rt 1: Describe Your Household Is this a joint case?		,			<u> </u>
1.						
	■ No. Go to line 2.					
	Yes. Does Debtor 2 live in a separat	e nousenoid?				
	☐ No ☐ Yes. Debtor 2 must file Officia	l Form 106J-2, <i>Expenses f</i>	or Separate Household of De	ebtor 2.		
2.	Do you have dependents? ☐ No					
	Do not list Debtor 1 and	Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the			60422309 15		□No
	dependents names.		daughter		14	Yes
						□ No
						☐ Yes
						□No
						☐ Yes
						□ No
3.	Do your expenses include					☐ Yes
J.	expenses of people other than yourself and your dependents?					
	t 2: Estimate Your Ongoing Monthly					
exp	timate your expenses as of your bankrup penses as of a date after the bankruptcy plicable date.	etcy filing date unless yo is filed. If this is a supple	u are using this form as a s mental <i>Schedule J</i> , check	supplen the box	nent in a Chapte at the top of the	r 13 case to report e form and fill in the
Inc	lude expenses paid for with non-cash go	vernment assistance if v	rou know the			
val	ue of such assistance and have included ficial Form 106I.)				Your expe	nses
4.	The rental or home ownership expense payments and any rent for the ground or lo			. \$		350.00
	If not included in line 4:					
	4a. Real estate taxes		4ε	ı. \$		0.00
	4b. Property, homeowner's, or renter's is	nsurance		;		0.00
	4c. Home maintenance, repair, and up	keep expenses		. \$ _		25.00
	4d. Homeowner's association or condo			ı. \$ <u> </u>		0.00
5.	Additional mortgage payments for you	r residence, such as hom	e equity loans 5	. \$ _		0.00

Official Form 106J

Schedule J: Your Expenses

ebtor 1	Torres, Maria E.	Case nun	nber (if known)	
. Util	ities:			
. 6a.	Electricity, heat, natural gas	6a.	. \$	175.00
6b.	Water, sewer, garbage collection	6b.	·	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	189.00
6d.	Other. Specify:	6d.		
	od and housekeeping supplies			0.00
	Idcare and children's education costs	7.		500.00
		8.	·	100.00
	thing, laundry, and dry cleaning	9.	· · · · · · · · · · · · · · · · · · ·	75.00
	sonal care products and services	10.		75.00
	dical and dental expenses	11.	. \$ <u></u>	75.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	c	350.00
	not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books		·	
		13.	·	25.00
	aritable contributions and religious donations	14.	\$	0.00
	Urance.			
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	150	ď	
	. Health insurance	15a.		0.00
		15b.	•	0.00
15c		15c.		116.00
	. Other insurance. Specify:	15d.	. \$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			· · · · · · · · · · · · · · · · · · ·
•	cify:	16.	\$	0.00
	allment or lease payments:			· · · · · · · · · · · · · · · · · · ·
	. Car payments for Vehicle 1	17a.		250.00
	. Car payments for Vehicle 2	17b.	\$	0.00
17c	Other. Specify:	17c.	\$	0.00
17d	Other. Specify:	17d.	\$	0.00
. You	r payments of alimony, maintenance, and support that you did not repor	t as		
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 100	6I). 18.	\$	0.00
. Oth	er payments you make to support others who do not live with you.		\$	0.00
Spe		19.		
	er real property expenses not included in lines 4 or 5 of this form or on S			
	Mortgages on other property	20a.	\$	0.00
20b	. Real estate taxes	20b.	\$	0.00
20c	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d	. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	Homeowner's association or condominium dues	20e.		0.00
. Oth	er: Specify:		+\$	0.00
			-Ψ	0.00
	culate your monthly expenses		+	
	. Add lines 4 through 21.		\$	2,305.00
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	J-2	\$	
22c	Add line 22a and 22b. The result is your monthly expenses.		s ———	2,305.00
			<u> </u>	2,303.00
	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	•	2,237.00
23b	Copy your monthly expenses from line 22c above.	23b.	-\$	2,305.00
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-68.00
For e	you expect an increase or decrease in your expenses within the year afte example, do you expect to finish paying for your car loan within the year or do you expectication to the terms of your mortgage?	r you file this f t your mortgage p	form? payment to increase	or decrease because of a
	'es. Explain here:			

Fill in this i	nformation to identify y	our case:			
Debtor 1	Maria E. Torres				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	M iddle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	WASHINGTON, YAK	(IMA DIVISION	
Case number (If known)					Check if this is an amended filing
Official Fori		ın Individual	Debtor's S	Schedules	12/15
If two married pe	eople are filing together,	both are equally respons	ible for supplying cor	rrect information.	
obtaining money	is form whenever you fil y or property by fraud in 8 U.S.C. §§ 152, 1341, 18	connection with a bankru	r amended schedules iptcy case can result	s. Making a false statement, cor in fines up to \$250,000, or impr	icealing property, or isonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorne	y to help you fill out i	bankruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy P Declaration, and Sign	etition Preparer's Notice, nature (Official Form 119)
Under pena that they are	Ity of perjury, I declare t e true and correct.	hat I have read the summ	ary and schedules file	ed with this declaration and	
X /s/ Mar	ria E. Torres		X		
Maria	E. Torres re of Debtor 1		Signature o	of Debtor 2	
Date _	October 31, 2019		Date		

	Fill in this information to	identify your case:		ı		
Debtor				4		
Deptoi	First Name	Middle Name	Last Name)		
Debtor :		Middle Name	Last Name			
• •	States Bankruptcy Court fo		DF WASHINGTON, YAKIMA DIVISION			
				}		
Case nu (if known)	imber			[] Checki	if this is an
	· · · · · · · · · · · · · · · · · · ·			_	amende	ed filing
~ rri	1000					
	al Form 106Su	_		49		
			nd Certain Statistical Informa			2/15
nformat	ion. Fill out all of your so	hedules first; then complete the out a new <i>Summary</i> and check	e information on this form. If you are filing a	mended so	chedules	after you file
Part 1;	Summarize Your Asset	s				
					Your ass	sets
					Value of	what you own
1. Sci 1a.	h edule A/B: Property (Off Copy line 55, Total real es	icial Form 106A/B) state, from Schedule A/B			\$	0.00
					\$	11,700.00
					¢ —	
,	_				Ψ	11,700.00
Part 2:	Summarize Your Liabil	nues				
					Your liak Amount y	oilities YOU OWE
		ave Claims Secured by Property (A STATE OF THE PROPERTY OF THE
2 a.	Copy the total you listed in	n Column AAmount of claim, at the	bottom of the last page of Part 1 of Schedule E)	\$	1,800.00
		<i>Have Unsecured Claims</i> (Official n Part 1 (priority unsecured claims	Form 106E/F) s) from line 6e & <i>chedule E/F</i>		\$	0.00
			aims) from line 6j &chedule E/F		\$	19.335.00
	.,			····		10,000.00
			Your total lia	bilities \$		21,135.00
					n <u>a.</u>	
Part 3;	Summarize Your Incom	e and Expenses				
	nedule I: Your Income(Office or your combined monthly				\$	2,237.00
	nedule J: Your Expenses (0					
Cop	by your monthly expenses for	rom line 22c of Schedule J			\$	2,305.00
Part 4:	Answer These Question	ns for Administrative and Statis	tical Records			
6. Are		y under Chapters 7, 11, or 13? eport on this part of the form. Che	ck this box and submit this form to the court with	ı your other	· schedule	s.
■ 7. Wh	Yes at kind of debt do you ha	ve?				
	Your debts are primaril purpose." 11 U.S.C. § 10	y consumer debts. Consumer de 1(8). Fill out lines 8-9g for statistic	ebts are those "incurred by an individual primarily cal purposes, 28 U.S.C§ 159.	y for a pers	onal, famil	y, or household
		narily consumer debts. You have	e nothing to report on this part of the form. Check	k this box a	ınd submit	this form to the

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,850.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	6,500.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	6,500.00

	Fill in this information to ide	ntify your case:			
Debto	r 1 Maria E. Torre	Middle Name	Last Name		
Debto		wilddie Name	Lastivanie		
(Spouse	if, filing) First Name	Middle Name	Last Name		
United	i States Bankruptcy Court for th	e: EASTERN DISTRICT OF	WASHINGTON, YAKIMA D	IVISION	
Case i (if known	number n)				Check if this is an amended filing
State Be as d informa	cial Form 107 ement of Financia complete and accurate as pos ation. If more space is neede wn). Answer every question.	sible. If two married people a	re filing together, both are e	qually responsible for supp	4/19 olying correct r name and case number
Part 1		Marital Status and Where You	Lived Before		
1. W	hat is your current marital sta	itus?			
	Married Not married	•			
2. Du	uring the last 3 years, have yo	u lived anywhere other than t	where you live now?		
	No Yes. List all of the places you	lived in the last 3 years. Do not	include where you live now.		
D	ebtor 1 Prior Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. Wi states a	ithin the last 8 years, did you and territories include Arizona, C	ever live with a spouse or leg california, Idaho, Louisiana, Nev	al equivalent in a communit vada, New Mexico, Puerto Rid	y property state or territory co, Texas, Washington and V	(? (Community property visconsin.)
	No Yes. Make sure you fill out So	chedule H: Your Codebtors (Offi	cial Form 106H).		
Part 2	Explain the Sources of Yo	our Income			
Fill	d you have any income from o l in the total amount of income you are filing a joint case and you	ou received from all jobs and a	ill businesses, including part-	time activities.	idar years?
	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		Wages, commissions, bonuses, tips	\$25,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

De	ebtor 1	orres, Ma	ria E.		Cas	e number (if known)		
								
				Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of inco Check all that ap	ply.	Gross income (before deductions and exclusions)
Fo (Ja	r last cale nuary 1 t	ndar year: o December	31, 2018)	■ Wages, commissions, bonuses, tips	\$24,133.00	☐ Wages, comr bonuses, tips	nissions,	,
				☐ Operating a business		☐ Operating a b	ousiness	
Fo (Ja	r the cale inuary 1 t	ndar year be o December	efore that: 31, 2017)	■ Wages, commissions, bonuses, tips	\$28,000.00	☐ Wages, comr bonuses, tips	nissions,	
***************************************				☐ Operating a business		Operating a b	usiness	
	you are fi	ling a joint ca	ayments; pens ase and you h the gross inco	ner that income is taxable. Examplesions; rental income; interest; divave income that you received togother from each source separately	idends; money collected from gether, list it only once under [lawsuits; royalties; Debtor 1.	Social Security and gambling a	r, unemployment, and and lottery winnings. I
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
Pai	t 3: Lis	t Certain Pa	yments You	Made Before You Filed for B	exclusions) ankruptcy			
6.	Are eithe No.	Neither D	ebtor 1 nor 🛭	's debts primarily consumer o Debtor 2 has primarily consum personal, family, or household p	ner debts. Consumer debts a	are defined in 11 U.S	S.C. § 101(8) a	s "incurred by an
		During the	90 days befo	re you filed for bankruptcy, did y	ou pay any creditor a total of s	\$6,825* or more?		
		☐ Yes	List below of creditor. Do payments t	each creditor to whom you paid a o not include payments for dom o an attorney for this bankruptcy o on 4/01/22 and every 3 years a	iestic support obligations, suc / case.	ch as child support	and alimony. A	amount you paid that Also, do not include
	■ Yes.	Debtor 1 d	or Debtor 2 o	r both have primarily consum re you filed for bankruptcy, did y	ner debts.	·	sunciii.	
		■ No.	Go to line 7	7 .				
		□ _{Yes}	List below on payments for this bankru	each creditor to whom you paid a or domestic support obligations, ptcy case.	a total of \$600 or more and the such as child support and ali	e total amount you pa mony. Also, do not i	aid that credito nclude paymen	r. Do not include its to an attorney for
	Creditor	's Name and	l Address	Dates of paymen	it Total amount paid	Amount you still owe	Was this payı	ment for
	<i>Insiders</i> in which you	clude your re are an office	elatives; any g r, director, pe	bankruptcy, did you make a peneral partners; relatives of any rson in control, or owner of 20% rietor. 11 U.S.C. § 101. Include	general partners; partnerships or more of their voting securi-	s of which you are a	general partne	iding one for a
	■ No □ Yes.	List all pavm	ents to an ins	ider.				
		Name and		Dates of paymen	t Total amount paid	Amount you still owe	Reason for th	is payment

Statement of Financial Affairs for Individuals Filing for Bankruptcy

D	ebtor 1 Torres, Maria E.		Cas	e number(<i>if known</i>)		
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosig		yments or transfer an	y property on ac	count of a debt t	hat benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for thi	
Pa	art 4: Identify Legal Actions, Repossessions	s, and Foreclosures	· _			
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury ca and contract disputes.	y, were you a party in ai ases, small claims actions	ny lawsuit, court actio , divorces, collection su	on, or administrat uits, paternity action	ive proceeding?	tody modifications
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the c	ase
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below	y, was any of your prop	erty repossessed, for	eclosed, garnish	ad, attached, sei:	zed, or levied?
	No. Go to line 11.					
	☐ Yes. Fill in the information below. Creditor Name and Address	Department of the December of				
	Creditor Name and Address	Describe the Property Explain what happene	d	Date		Value of the property
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment becau No Yes. Fill in the details. Creditor Name and Address	cy, did any creditor, inc use you owed a debt? Describe the action the			set off any amou	nts from your Amoun
12.	Within 1 year before you filed for bankruptcy	was any of your prope	urty in the necession	taken	ion tha bouetit -t	
12.	court-appointed receiver, a custodian, or and	other official?	rty in the possession	i of an assignee f	or the benefit of	creditors, a
	■ No □ Yes					
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	ey, did you give any gift:	s with a total value of	more than \$600	per person?	1000
	Gifts with a total value of more than \$600 pe	Pr Describe the gifts		Dates the git	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrupto No Yes. Fill in the details for each gift or contrib		s or contributions wit	h a total value of	more than \$600	to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		ı contributed	Dates contri		Value
Pai	t 6: List Certain Losses					÷
15.	Within 1 year before you filed for bankruptcy	or since you filed for ba	ankruptcy, did you lo	se anything beca	use of theft, fire	, other disaster,

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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Det	otor 1 Forres, Maria E.	Case n	umber(if known)	·
	or gambling?			
	□ No			
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pen insurance claims on line 33 ofSchedule A/B: Property		Value of property lost
	single mom, estranged husband, he disappeared 2 years ago and no one has seen him; she thinks he is in Mexico	insurance claims of line 33 discreture A/B. Property	<i>(.</i>	\$0.00
Par	t 7: List Certain Payments or Transfers	S		
	consulted about seeking bankruptcy or p	ptcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? eparers, or credit counseling agencies for services requi		iy to anyone you
	□ No			
	■ Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment or	Amount of
	Address Email or website address Person Who Made the Payment, if Not Y	transferred 'ou	transfer was made	payment
	Patrick A True 303 E D St Ste 2 Yakima, WA 98901-2300	\$565.00 plus filing fee	October 2019	\$900.00
	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that y	ptcy, did you or anyone else acting on your behalf litors or to make payments to your creditors? /ou listed on line 16.	pay or transfer any propert	y to anyone who
	■ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	transferred in the ordinary course of you Include both outright transfers and transfers gifts and transfers that you have already lister No	made as security (such as the granting of a security inte	-	• • •
	Yes. Fill in the details.			
	Person Who Received Transfer Address	property transferred pays	cribe any property or ments received or debts I in exchange	Date transfer was made
	Person's relationship to you	,		
9.	Within 10 years before you filed for bank beneficiary? (These are often called asset-p	ruptcy, did you transfer any property to a self-settle protection devices.)	ed trust or similar device of	which you are a
	No Paris a Livin			
	Yes. Fill in the details.	_	_	
	Name of trust	Description and value of the property tran	sferred	Date Transfer was made

Statement of Financial Affairs for Individuals Filing for Bankruptcy

וכן	eptor 1 I orres, Maria E.		Case n	umber (if known)	
Pá	art 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit Bo	exes, and Storage Uni	ts	
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc	r other financial accounts:	certificates of depos	_	
	■ No	national, and other midnet	i matitutiona,		
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfe
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for ba	nkruptcy, any safe de	eposit box or other depos	itory for securities,
	■ No				
	Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acces Address (Number, Stree and ZIP Code)		e the contents	Do you still have It?
22.	Have you stored property in a storage unit o	r place other than your ho	me within 1 year befo	re you filed for bankrupt	cy?
	■ No				
	Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had to it?	l access Describ	e the contents	Do you still have it?
	·	Address (Number, Stree and ZIP Code)	et, City, State		
Pa	rt 9: Identify Property You Hold or Control t	for Someone Else			
23.	Do you hold or control any property that son someone.	neone else owns? Include	any property you bor	rowed from, are storing	or, or hold in trust for
	≡ No				
	☐ Yes. Fill in the details.				
	Owner's Name	Where is the propert	rv? Decorih	e the property	Malaa
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, State Code)	and ZIP	e the property	Value
Pa	rt 10: Give Details About Environmental Info	rmation			
For	the purpose of Part 10, the following definition	ns apply:			
	Environmental law means any federal, state, toxic substances, wastes, or material into the controlling the cleanup of these substances,	air, land, soil, surface wa	on concerning poliuti ter, groundwater, or c	on, contamination, releas other medium, including s	ses of hazardous or statutes or regulations
	Site means any location, facility, or property own, operate, or utilize it, including disposal	as defined under any envi sites.	ronmental law, wheth	er you now own, operate	, or utilize it or used to
	Hazardous material means anything an envir	onmental law defines as a	hazardous waste, ha	zardous substance, toxic	substance, hazardous
Rep	ort all notices, releases, and proceedings that		ss of when they occu	rred.	
24.	Has any governmental unit notified you that y	you may be liable or poten	tially liable under or i	n violation of an environ	mental law?
	■ No □ Yes. Fill in the details.				
	Name of site	Governmental unit	r .i.	ronmontal law if you	Data of matica
		V374441 Elisimatily 1 131412	Pr 1317	CONTRACTOR DISCOVER LANGE	1000 A4 41

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Address (Number, Street, City, State and ZIP Code)

know it

page 5

Address (Number, Street, City, State and ZIP Code)

De	ebtor 1	Torres, Maria E.		Case number (if known)	
25.	Have	you notified any governmental unit o	f any release of hazardous material?		
		No			
		Yes. Fill in the details.			
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or ad	ministrative proceeding under any enviror	nmental law? Include settlements :	and orders.
		No			
		Yes. Fill in the details.			
		e Title e Number	Name Address (Number, Street, City, State	Nature of the case	Status of the case
	1 1 20	(a) (b) (ii) (i) (b) (b)	and ZIP Code)		
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business		
27.			tcy, did you own a business or have any o		/ business?
		☐ A sole proprietor or self-employed	in a trade, profession, or other activity, eit	ther full-time or part-time	
	[☐ A member of a limited liability comp	pany (LLC) or limited liability partnership ((LLP)	
	1	☐ A partner in a partnership			
	[\square An officer, director, or managing ex	ecutive of a corporation		
	[\square An owner of at least 5% of the votin	g or equity securities of a corporation		
		No. None of the above applies. Go to I	Part 12.		
		es. Check all that apply above and fil	l in the details below for each business.		
		ness Name	Describe the nature of the business	Employer Identification numb	er
	Addr (Numb	ess per, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.
28.	Within instite	n 2 years before you filed for bankrup utions, creditors, or other parties.	tcy, did you give a financial statement to a	unyone about your business? Inclu	ude all financial
	I	lo			
		es. Fill in the details below.			
	Name Addr		Date Issued		
		er, Street, City, State and ZIP Code)			
Pa	rt 12:	Sign Below			
true ban 18 L	and co kruptcy J.S.C. §	orrect. I understand that making a fals y case can result in fines up to \$250,00 § 152, 1341, 1519, and 3571.	nancial Affairs and any attachments, and I on estatement, concealing property, or obtain 00, or imprisonment for up to 20 years, or	ining money or property by fraud i	nat the answers are in connection with a
		E. Torres Torres	Signature of Debtor 2		
		of Debtor 1	•		
Dat	te <u>O</u>	ctober 31, 2019	Date		
Did ■ N □ Y	10	tach additional pages to Your Stateme	nt of Financial Affairs for Individuals Filin	<i>g for Bankruptcy</i> (Official Form 10	7)?
Did		y or agree to pay someone who is not	an attorney to help you fill out bankruptc	y forms?	
□ Y	'es. Na	me of Person Attach the Bankruj	ptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).	
Offic	ial Form	107 Staten	nent of Financial Affairs for Individuals Filing fo	or Bankruptcy	page (

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Eill in i	his information to identify a manage							
	his Information to identify your case:			C 12	heck one bo 22A-1Supp:	x only as o	lirected in this form and in Form	
Debtor	Maria E. Torres			#	zz (= roupp.			
Debtor (Spouse,	<u> </u>				■ 1. There	is no pres	umption of abuse	
United	States Bankruptcy Court for the: Eastern Distric		ington,		appli	es will be r	to determine if a presumption of abuse made unde <i>rChapter 7 Means Test</i> cial Form 122A-2),	
Case n					☐ 3. The N	leans Test	does not apply now because of qualified out it could apply later.	t
					☐ Check	if this is a	an amended filing	
Offic	ial Form 122A - 1						,	
Cha	pter 7 Statement of Your C	urren	t Moi	nthly Inc	ome		10/1	9
a separa number :	mplete and accurate as possible. If two married peop te sheet to this form, include the line number to which (if known), if you believe that you are exempted from service, complete and file Statement of Exemption from Calculate Your Current Monthly Income	h the additi a presump	lonal info tion of ab	rmation applies. Juse because vo	On the top a	of any addit e primarily	ional pages, write your name and case	
1. W	hat is your marital and filing status? Check one	only.						٦
	Not married. Fill out Column A, lines 2-11.	y .						
	Married and your spouse is filing with you. Fill	out both (Columns	Δ and R lines	2_11			
	Married and your spouse is NOT filing with yo				Z-11.			
	☐ Living in the same household and are not le		-	-	umne A and	B lines 2	11	
	☐ Living separately or are legally separated. F							
	penalty of perjury that you and your spouse are apart for reasons that do not include evading the	legally sep	parated ur	nder nonbankru	ptcy law that	t applies or	that you and your spouse are living	
101(1 6 moi	n the average monthly income that you received from 10A). For example, if you are filing on September 15, the 6 nths, add the income for all 6 months and divide the total the same rental property, put the income from that propert	3-month per by 6. Fill in 1	riod would the result.	be March 1 throu Do not include a	ugh August 3° ny Income an	I. If the amo	unt of your monthly income varied during the	э
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2. Yo	our gross wages, salary, tips, bonuses, overtime cyroll deductions).	∍, and cor	nmissio	ns (before all	s 2	850.00	¢	Ì
3. Al	imony and maintenance payments. Do not includ Diumn B is filled in.	de paymer	nts from a	a spouse if	\$ \$	0.00	\$	
4. Al of fro	I amounts from any source which are regularly you or your dependents, including child suppoor an unmarried partner, members of your househol ommates. Include regular contributions from a spot on the include payments you listed on line 3	rt. Include	regular pendents	contributions , parents, and	ì. \$	0.00	\$	
	et income from operating a business, profession	ı, or farm						ľ
				otor 1]
Gr	oss receipts (before all deductions)	\$ _	0.00					1
	dinary and necessary operating expenses	-\$ _	0.00					Į
	et monthly income from a business, profession, or f	arm \$ _	0.00	Copy here ->	\$	0.00	\$	Į
6. Ne	et income from rental and other real property		DI	44				ļ
_		\$	0.00	otor 1				l
	oss receipts (before all deductions)	-\$	0.00					-
	dinary and necessary operating expenses	` 	0.00	Copy here ->	\$	0.00	\$	ļ
	et monthly income from rental or other real property	Φ	0.00	oopy nere ->		0.00	\$ \$	
/. Int	terest, dividends, and royalties				\$	0.00	•	- 1

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debt	or 1 <u>T</u>	Forres	s, Maria E.					Case i	number (i	if known)		<u></u>		
								Colum Debto				nn B or 2 or iling s	oouse	
8.			ent compensation					\$		0.00	\$		<u>'</u>	,
	Social	Secur	the amount if you contend that the a ity Act. Instead, list it here:				under the							
	For	you	oouse		.\$		0.00							
9.	Pension	your sp on or r	retirement income. Do not include	anv am	S Nount rece	eived that was	a henefit							
	under include Govern a mem 61 of ti of retire title 10	the Soo e any conment in the of itle 10, ed pay other	cial Security Act. Also, except as sta ompensation, pension, pay, annuity, in connection with a disability, comb the uniformed services. If you receive then include that pay only to the extantomic be en to which you would otherwise be en than chapter 61 of that title.	ated in I or allo at-relat red any ent that titled if	the next s wance pa ted injury o retired pa t it does n retired ur	entence, do not by the United by the United by the United by the desired by the United	not ted States or death of chapter amount ision of	\$		0.00	\$			
10	not inc victim of compe Govern a mem	lude ar of a wa ensation nment i lber of t	n ail other sources not listed about my benefits received under the Social or crime, a crime against humanity, on my pension, pay, annuity, or allowance on connection with a disability, combit the uniformed services. If necessary	l Secui or interr e paid l at-relat	rity Act; parational or by the Un ed injury o	ayments rece domestic tel ited States or disability, d	eived as a rorism; or or death of	,						
								\$		0.00	\$			
								\$		0.00	\$			
		Tota	l amounts from separate pages, if a	ny.			+	\$		0.00	\$			
11.	Calcul each c	l ate yo olumn.	ur total current monthly income. Then add the total for Column A to	Add ling the to	nes 2 thro otal for Co	ugh 10 for blumn B.	\$	2,850.0	00	\$				2,850.00
Part	2:	Deterr	nine Whether the Means Test Ap	plies t	o You								incom	ie
12.	Calcul	ate yo	ur current monthly income for th	e year	. Follow th	nese steps:								
	12a. C	ору уо	ur total current monthly income from	m line	11				Copy li	ine 11 h	ere=>		\$	2,850.00
	М	lultiply	by 12 (the number of months in a y	rear)									х	 12
	12b. T	he resu	ılt is your annual income for this par	t of the	form							12b.		34,200.00
13.	Calcula	ate the	median family income that appli	ies to y	you. Foild	w these step	s:					l		
	Fill in th	ne state	e in which you live.		1	WA								
	Fill in th	he num	ber of people in your household.			2								
			lian family income for your state an									13.	\$	78,357.00
	To find form. T	a list c his list	of applicable median income amour may also be available at the bankr	nts, go uptcy d	online us cleisk office	ing the link s	pecified in	the sep	oarate i	nstruction	ons for th	nis	Ψ	
14.	How do	o the li	nes compare?											
	14a.		ine 12b is less than or equal to line So to Part 3.	e 13. O	n the top	of page 1, c	heck box 1	T ,here is	no pre	sumptio	n of abu	se.		
	14b.		ine 12b is more than line 13. On th Go to Part 3 and fill out Form 122A-	e top o 2.	of page 1,	, check box 2	The presu	mption c	of abuse	e is dete	ermined l	by Forn	n 122A	-2.
Part	3:	Sign B	elow											

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Maria E. Torres

Maria E. Torres Signature of Debtor 1

Date October 31, 2019

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debtor 1	Torres, Maria E.	Case number (if known)	
	AND A DESCRIPTION OF THE PROPERTY OF THE PROPE		

MM/DD/YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	•
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	filing fee
\$550_	administrative fee
\$1.717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+		administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft.

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations.

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_formshtml#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/ApprovedCreditAndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Maria E. Torres 607 S Toppenish Ave Toppenish, WA 98948-1720

Patrick A. True True Law Group 303 E. "D" Street, Ste 2 Yakima, WA 98901

Action Collectors PO Box 2365 Yakima, WA 98907-2365

Allied Interstate PO Box 361445 Columbus, OH 43236-1445

Astria Sunnyside PO Box 719 Sunnyside, WA 98944-0719

Bonneville 1186 E 4600 S Ste 100 Ogden, UT 84403-4896

Cascade Natural Gas PO Box 990065 Boise, ID 83799-0065 Century Link
PO Box 2961
Phoenix, AZ 85062-2961

Chapman Financial PO Box 7100 Coeur d Alene, ID 83816-1940

Convergent Outsourcing 10750 Hammerly Blvd Ste 200 Houston, TX 77043-2317

Credit Protection Association PO Box 9037 Addison, TX 75001-9037

First National Collection Bureau 610 Waltham Way Sparks, NV 89434-6695

First Premier PO Box 5524 Sioux Falls, SD 57117-5524

Harvard Collection Serv. 4839 N Elston Ave Chicago, IL 60630-2534

LVNV Funding PO Box 10497 Greenville, SC 29603-0497

Macy's PO Box 689195 Des Moines, IA 50368-9195

MBA Law
222 Texoma Pkwy Ste 160
Sherman, TX 75090

NCO Financial PO Box 15630 Wilmington, DE 19850-5630

PAML
PO Box 2720
Spokane, WA 99220-4002

Payne & Hickel PO Box 582 Woodinville, WA 98072-0582

RJM Aquistions 575 Underhill Blvd Ste 224 Syosset, NY 11791-3416 Synchrony Bank/Walmart PO Box 965061 Orlando, FL 32896-5061

Toppenish Community Hosp. 502 W 4th Ave Toppenish, WA 98948-1616

Unique Collections 119 E Maple St Jeffersonville, IN 47130-3439

US Bank PO Box 108 Saint Louis, MO 63166-0108

US Dept of Education PO Box 5227 Greenville, TX 75403-5227

West Asset Managment 5500 Oakbrook Pkwy Ste 300 Norcross, GA 30093-2273

Yakima Adjustment Service PO Box 512 Yakima, WA 98907-0512 Yakima Memorial Hospital 2811 Tieton Dr Yakima, WA 98902-3761

Yakima Valley Farm Workers PO Box 190 Toppenish, WA 98948-0190

YCCS PO Box 9244 Yakima, WA 98909-0244

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United States Bankruptcy Court Eastern District of Washington, Yakima Division

IN RE:		Case No.
Torres, Maria E.		Chapter 7
	Debtor(s)	A CONTRACTOR OF THE PROPERTY O
	VERIFICATION OF CREDITOR MATRI	X
The above named debtor(s) hereby ve	rify(ies) that the attached matrix listing creditors	is true to the best of my(our) knowledge.
		, , , ,
Date: October 31, 2019	Signature: /s/ Maria E. Torres	
	Maria E. Torres	Debtor
Date:	Signature:	
		Joint Debtor, if any

United States Bankruptcy Court Eastern District of Washington, Yakima Division

In re	Torres, Maria E.		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	NSATION OF ATTO	ORNEY FOR I	DEBTOR
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruntes	or agreed to be no	d to me for convices randound out
	For legal services, I have agreed to accept		\$	565.00
	Prior to the filing of this statement I have received		\$	565.00
	Balance Due			0.00
2. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
ļ. I	I have not agreed to share the above-disclosed comper firm.	sation with any other person	unless they are mer	nbers and associates of my law
	I have agreed to share the above-disclosed compensati copy of the agreement, together with a list of the name	on with a person or persons was of the people sharing in the	who are not member e compensation is at	s or associates of my law firm. A cached.
5. II	n return for the above-disclosed fee, I have agreed to reno	ler legal service for all aspec	ts of the bankruptcy	case, including:
о. с.	Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors [Other provisions as needed]	ent of affairs and plan which	may be required:	- ··
. В	y agreement with the debtor(s), the above-disclosed fee d	oes not include the following	g service;	
	(CERTIFICATION		
I o this ba	certify that the foregoing is a complete statement of any a nkruptcy proceeding.		payment to me for	representation of the debtor(s) in
Oc	tober 31, 2019	/s/ Patrick A. True		
Da	te	Patrick A. True		
		True Law Group		
		303 E. "D" Street	•	
		Yakima, WA 989	01	
		ptcmecf@gmail.co	om.	
		Name of law firm		

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United States Bankruptcy Court Eastern District of Washington, Yakima Division

IN RE:		Case No.	
Torres, Maria E.			
Debtor(s)		Chapter 7	
CERTIFICATION OF I UNDER § 342(b)	NOTICE TO CONSUMER OF THE BANKRUPTCY (DEBTOR(S) CODE	
Certificate of [Non-At	ttorney] Bankruptcy Petition	ı Preparer	
I, the [non-attorney] bankruptcy petition preparer signing to notice, as required by § 342(b) of the Bankruptcy Code.	the debtor's petition, hereby certi	fy that I delivered to the debtor the attached	
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of	
X		the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)	
Signature of Bankruptcy Petition Preparer of officer, princ partner whose Social Security number is provided above.	ipal, responsible person, or		
Cert	ificate of the Debtor		
I (We), the debtor(s), affirm that I (we) have received and I	read the attached notice, as requi	red by § 342(b) of the Bankruptcy Code.	
Torres, Maria E.	X /s/ Maria E. Torres	10/31/2019	
Printed Name(s) of Debtor(s)	Signature of Debtor		
Case No. (if known)	X		
	Signature of Joint D	Pebtor (if any) Date	

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Debtor 1	Maria E Tarres					
Deptor 1	Maria E. Torres First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF WASHINGTON, YAKIMA DIVISION			
Case number						
(if known)				☐ Check if this is an		
				☐ Check if this is an amended filing		
Official Fo						
<u>Stateme</u>	nt of Intentio	n for Individ	duals Filing Under Chapte	er 7 12/15		
	ividual filing under chap		this form if:			
_	e claims secured by you					
you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form						
f two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign						
e as complete a	and accurate as possible our name and case num	. If more space is need	ded, attach a separate sheet to this form. On the	top of any additional pages,		
	our Creditors Who Have	•				

For any credite information be	ors that you listed in Par elow.	t 1 of Schedule D: Cre	ditors Who Have Claims Secured by Property (O	fficial Form 106D), fill in the		
Identify the cr	editor and the property th		hat do you intend to do with the property that a	Did you claim the property as exempt on Schedule C?		
Creditor's						
name:			Surrender the property. Retain the property and redeem it.	□ No		
		_	Retain the property and redeem it. Retain the property and enter into a Reaffirmation	□Yes		
Description of			Agreement.			
property			l Retain the property and [explain]:			
securing debt:						
Creditor's			Surrender the property.	□ No		
name:			Retain the property and redeem it.	T140		
			Retain the property and enter into a Reaffirmation	☐ Yes		
Description of			Agreement.			
property	,		Retain the property and [explain];			
securing debt:						
Creditor's			Currender the man of			
name:			Surrender the property.	□ No		
			Retain the property and redeem it.	☐ Yes		
Description of		Ц	Retain the property and enter into a Reaffirmation Agreement.	□ 162		
property		П	Retain the property and [explain]:			
securing debt:		-	recommend property and (explain).			

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

page 1

□No

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Debtor 1 Torres, Maria E.	Case number(# known)	
name:	☐ Retain the property and redeem it.☐ Retain the property and enter into a <i>Reaffirmation</i>	□Yes
Description of	Agreement.	
property securing debt:	☐ Retain the property and [explain]:	
ille illiorillation below. Do not list real estate lea	you listed in Schedule G: Executory Contracts and Unexpired L	eases (Official Form 106G), fill in
may assume an unexpired personal property le	ase if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	period vido not yet ended. Tou
Describe your unexpired personal property lea	ses.	Will the lease be assumed?
Lessor's name: Description of leased	1	□ No
Property:	1	□ Yes
Lessor's name:	1	□ No
Description of leased Property:		⊒ Yes
Lessor's name:		
Description of leased		□ No
Property:	ו	☐ Yes
Lessor's name: Description of leased	ו	□ No
Property:		☐ Yes
Lessor's name:	r	J No
Description of leased Property:		⊒ Yes
Lessor's name:		·- · - - ·
Description of leased Property:		□ No
		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below		
Inder penalty of perjury, I declare that I have ind roperty that is subject to an unexpired lease.	licated my intention about any property of my estate that secure	es a debt and any personal
X /s/ Maria E. Torres	X	
Maria E. Torres Signature of Debtor 1	Signature of Debtor 2	
Date October 31, 2019	Date	

Statement of Intention for Individuals Filing Under Chapter 7

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